

ORIGINAL

OFFICIAL FILE  
ILLINOIS COMMERCE COMMISSION

STATE OF ILLINOIS  
ILLINOIS COMMERCE COMMISSION

Transcend Multimedia, LLC

Application for a certificate of  
local authority to operate as  
a reseller and facilities-based  
carrier of local telecommunications  
services throughout the  
State of Illinois.

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05-0766

APPLICATION FOR CERTIFICATES  
OF SERVICE AUTHORITY

ILLINOIS  
COMMERCE COMMISSION  
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CHIEF CLERK'S OFFICE

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Dated: December 8, 2005

Docket No. \_\_\_\_\_  
ICC Office Use Only

Transcend Multimedia, LLC :  
: :  
Application for a certificate of :  
local authority to operate as a :  
reseller and facilities based carrier of :  
telecommunications services :  
in the State of Illinois. :

**APPLICATION FOR A CERTIFICATE TO BECOME A  
TELECOMMUNICATIONS CARRIER**

**GENERAL**

1. Transcend Multimedia, LLC FEIN # 04-3794797  
869 N. LaSalle, Suite 300  
Chicago, Illinois 60610

2. Authority Requested: (Mark all that apply)

☐ 13-403 Facilities Based Interexchange

☒ 13-404 Resale of Local and/or Interexchange

(Applicant currently pending certification as a Reseller of Interexchange Services in Docket No. 05-0592)

☒ 13-405 Facilities Based Local

3. Request for waivers/variances: In applications for local exchange service authority under Sections 13-404 or 13-405, waivers of Part 710 and of Section 735.180 or Part 735 are generally requested. In applications for interexchange service authority under Sections 13-403 and 13-404, waivers of Part 710 and 735 are generally requested. Please indicate which waivers Applicant is requesting and explain why Applicant has requested each waiver/variance.

☒ Part 710 Uniform System of Accounts for Telecommunications Carriers

☐ Part 735 Procedures Governing the Establishment of Credit, Billing, Deposits, Termination of Service and Issuance of Telephone Directories for Local Exchange Telecommunications Carriers in the State of Illinois

☒ Section 735.180 Directories

☐ Other

Explanations and support for each waiver/variance request are set forth in Appendix A in response to Question 1.

4. For all applicants requesting local exchange authority under Section 13-404 or Section 13-405, please complete the following:

- (a) the Standard Questions for Applicants Seeking Local Exchange Service Authority found in Appendix A of this document
- (b) the 9-1-1 Questions for Applicants Seeking Local Exchange Service Authority found in Appendix B of this document;
- (c) the Financial Questions for Applicants Seeking Local Exchange Service Authority found in Appendix C of this document; and
- (d) if applicable, the Prepaid Service Questions for Applicants Seeking Local Exchange Service Authority found in Appendix D of this document.

See attached Appendices A, B, C & D

5. In what area of the state does the Applicant propose to provide service?

Resold and Facilities-Based Local Exchange – Throughout the State of Illinois or to the extent facilities and/or resale tariffs of Transcend's wholesale suppliers permit.

6. Please attach a sheet designating contact persons to work with Staff on the following:

- a) issues related to processing this application
- b) consumer issues
- c) customer complaint resolution
- d) technical and service quality issues
- e) "tariff" and pricing issues
- f) 9-1-1 issues
- g) security/law enforcement

Please identify each contact person's (i) name, (ii) title, (iii) mailing address, (iv) telephone number, (v) facsimile number, and (vi) e-mail address.

Please see list of designated contacts attached as Exhibit 1.

7. Please check type of organization?

\_\_\_\_\_ Individual \_\_\_\_\_ Corporation  
 \_\_\_\_\_ Partnership Date corporation was formed \_\_\_\_\_  
 X  Other (Specify) Limited Liability Company In what state? Illinois

8. Submit a copy of articles of incorporation and a copy of certificate of authority to transact business in Illinois.

Please see Exhibit 2 for LLC Operating Agreement.

9. List jurisdictions in which Applicant is offering service(s).

Please see Exhibit 3 for a list of states in which Applicant is authorized to provide resold long distance services. Applicant is currently pending certification as a long distance reseller by the Illinois Commerce Commission in Docket No. 05-0592.

Applicant is not currently offering local exchange services in any state.

10. Has the Applicant, or any principal in Applicant, been denied a Certificate of Service or had its certification revoked or suspended in any jurisdiction in this or another name?

\_\_\_\_\_ YES (Please provide details)        X        NO

11. Have there been any complaints or judgments levied against the Applicant in any other jurisdiction?

\_\_\_\_\_ YES        X        NO

If YES, please describe fully. \_\_\_\_\_

12. Has the Applicant provided service under any other name?

\_\_\_\_\_ YES        X   NO

If YES, please list. \_\_\_\_\_

13. Will the Applicant keep its books and records in Illinois?

  X   YES      \_\_\_\_\_ NO

If NO, please list.

#### MANAGERIAL

14. Please attach evidence of the applicant's managerial and technical resources and ability to provide service. This may be in either narrative form, resumes of key personnel, or a combination of these forms.

Please see Exhibit 4.

15. List officers of Applicant.

Please see Exhibit 5.

16. Does any officer of Applicant have an ownership or other interest in any other entity which has provided or is currently providing telecommunications services?

\_\_\_\_\_ YES        X        NO

If YES, list entity. \_\_\_\_\_

17. How will Applicant bill for its service(s)? (At a minimum, describe how often the Applicant will bill for service and details of the billing statement.)

Applicant will directly bill its customers monthly. Applicant's invoices provide details regarding all charges, including usage and recurring charges. Applicant's invoices also contain separate line items related to state and federal taxes, surcharges and fees. A sample billing statement is attached hereto at Exhibit 6.

18. How does Applicant propose to handle service, billing and repair complaints? (At a minimum, describe Applicants internal process for complaint resolution, the complaint escalation process, the timeframe and process by which the customer is notified by Applicant that they may seek assistance from the Commission?)

In the event of a billing dispute between the customer and the Applicant, the customer shall notify Applicant of its disagreement within thirty days of receiving its bill. The customer may request, and Applicant will provide, a detailed review of the disputed amount. The undisputed amount and any subsequent billing must be paid on a timely basis. If, after investigation by a company manager, there is still a disagreement about the disputed amount, the customer is notified that an appeal to the state commerce commission may be made. Applicant's toll free number to receive customer complaints and inquiries is 877-462-7171.

19. Will personnel be available at Applicant's business to office during regular working hours to respond to inquiries about service of billing?

  X   YES                      NO

20. What telephone number(s) would a customer use to contact your company?

877-462-7171

21. Will Applicant abide by all Federal and State slamming and cramming laws pursuant to Section 13-902 of the Public Utilities Act and Section 258 of the 1996 Telecommunications Act?

  X   YES                      NO

22. Please describe applicant's procedures to prevent slamming and cramming of customers?

Applicant adheres to all federal and state specific anti-slamming rules. Applicant does not employ or use telemarketers to sell its services to the public. Applicant's procedures for changing a customer's preferred carrier requires a signed Letter of Authorization that complies with FCC Regulations and/or an independent third-party verification of each customer request for service.

23. If granted authority to operate as a local exchange carrier, will the applicant abide by the following 83 Illinois Administrative Code Parts: 705, 710, 720, 725, 730, 732, 735, 755, 756, 757, 770, and 772?

Not Applicable.

                     YES                      NO

If NO, Please provide an explanation.

24. Is Applicant aware that it must file tariffs prior to providing service in Illinois?

  X   YES                      NO

#### FINANCIAL

25. Please attach evidence of Applicant's financial fitness through the submission of its most current income statement and balance sheet, or other appropriate documentation of applicant's financial resources and ability to provide service.

Please see Exhibit 7.

#### TECHNICAL

26. Does Applicant utilize its own equipment and/or facilities?

\_\_\_\_\_ YES \_\_\_\_\_ X \_\_\_\_\_ NO

If YES, please list the facilities Applicant intends to utilize. Also include evidence that Applicant possesses the necessary technical resources to deploy and maintain said facilities:

\_\_\_\_\_

\_\_\_\_\_

If NO, which facility provider(s) services does the Applicant intend to use?

Applicant resells local telecommunications services supplied by MCI. Applicant requests certification as a facilities-based provider of local exchange services to facilitate a future transition to leased facilities (Unbundled Network Elements) or deployment of its own facilities. Applicant does not have any plans to lease or deploy its own facilities at this time.

27. Please describe the nature of service to be provided (e.g., operator services, internet, debit cards, long distance service, data services, local service, prepaid local service).

Applicant seeks authority to provide resold or facilities-based competitive local exchange telecommunications services. Applicant seeks authority to provide these services throughout the state of Illinois, or the extend the facilities of its underlying carrier, MCI, permit. The local exchange services Applicant proposes to offer include DS-0, DS-1, DS-3 and OC local loops and transmission, local dial tone service, and CLASS features, such as call waiting, call forward, etc. Applicant will also provide data services. Applicant will market services exclusively to small, medium and large business or enterprise customers. Initially, all local exchange services will be provided through a resale agreement with MCI.

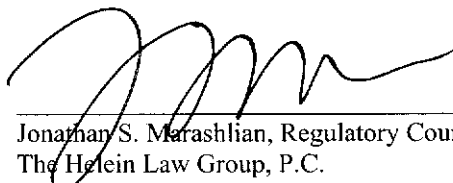
28. Will technical personnel be available at all times to assist customers with service problems?

\_\_\_\_\_ X \_\_\_\_\_ YES \_\_\_\_\_ NO

29. If Applicant intends to provide payphone service, will the equipment utilized comply with FCC requirements and Finding (9) of the Commission Order entered in Docket No. 84-0442 on June 11, 1986, including, but no limited to: (a) touch dialing; (b) access to 9-1-1- and "0" operator dialing without use of a coin; (c) rules governing use of payphones by disabled persons; (d) ability to complete local and long-distance calls; (e) unlimited duration for local calls; and (f) a message explaining the telephone's general operations, dialing instructions for emergency assistance, payphone owner's name, method of reporting service problems and method of receiving credit for faulty calls?

Not Applicable.

\_\_\_\_\_ YES \_\_\_\_\_ NO

  
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**VERIFICATION**

STATE OF ILLINOIS

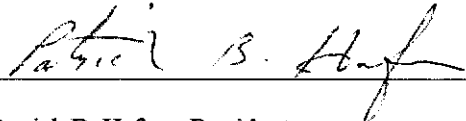
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COUNTY OF COOK

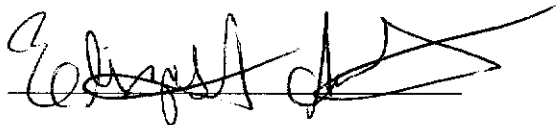
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Personally appeared before the undersigned, an officer duly authorized to administer oaths, Patrick B. Hafner, who first being duly sworn, deposes and says that he is the President of Transcend Multimedia, LLC, is of sound mind and lawful age, that he has read the application for intrastate telecommunications authority submitted on behalf of Transcend Multimedia, LLC and knows the contents thereof, and that the statements made herein are true to the best of his knowledge and belief.



Patrick B. Hafner, President  
Transcend Multimedia, LLC

Subscribed and sworn before me, this 29th day of November, 2005.



My Commission Expires 02/22/06

